

PATENT NUMBER

## U.S. UTILITY Patent Application

**O.I.P.E.**

PATENT DATE

SCANNED

TYR 3

**Q.A**

10

APPLICATION NO.

**CONT/PRIOR**

CLASS	DATE	TIME	LOCATION	INSTRUCTOR
101	10/10/2023	10:00 AM	Room 101	Dr. Smith
102	10/10/2023	11:00 AM	Room 102	Dr. Jones
103	10/10/2023	12:00 PM	Room 103	Dr. Brown
104	10/10/2023	1:00 PM	Room 104	Dr. Green
105	10/10/2023	2:00 PM	Room 105	Dr. White
106	10/10/2023	3:00 PM	Room 106	Dr. Black
107	10/10/2023	4:00 PM	Room 107	Dr. Grey
108	10/10/2023	5:00 PM	Room 108	Dr. Blue
109	10/10/2023	6:00 PM	Room 109	Dr. Red
110	10/10/2023	7:00 PM	Room 110	Dr. Yellow

SUBCLASS

ART UNIT

EXAMINER *N. J. Jones*

## APPLICANTS

# Time

PTO-2040  
12/89**ISSUING CLASSIFICATION**[illegible]

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<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>			<b>CLAIMS ALLOWED</b>	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			<b>NOTICE OF ALLOWANCE MAILED</b>  _____	
<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____  _____	_____ (Primary Examiner) (Date)			<b>ISSUE FEE</b>	
				Amount Due	Date Paid
<input type="checkbox"/> The terminal ____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)			<b>ISSUE BATCH NUMBER</b>	
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